

DECLARATION
FOR UTILITY OR DESIGN
PATENT APPLICATION

☐ Declaration Submitted With Initial Filing
☒ Declaration Submitted After Initial Filing

) Attorney Docket No.: 62884
)
) First Named Inventor: Farahmandi, et al.
)
) Application Number: 09/377,328
)
) Filing Date: 8/18/99
)
) Group Art Unit:
)
) Examiner Name:

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

MULTI-ELECTRODE DOUBLE-LAYER CAPACITOR HAVING HERMETIC ELECTROLYTE SEAL

the specification of which:

() is attached hereto, or

(X) was filed by an authorized person on my behalf on 8/18/99
as United States Application Number 09/377,328.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT international application which designated at least one country other than the United States of America, listed below, and I have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application, on this invention filed by me or my legal representatives or assigns and having a filing date before that of the application on which priority is claimed:

Prior Foreign Application Number(s)	Country	Foreign Filing Date	Priority Not Claimed	Certified Copy Attached	
				Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below:

<u>Provisional Application</u>	<u>Provisional Application</u>
<u>Number(s)</u>	<u>Filing Date</u>

I hereby claim the benefit under Title 35, United States Code, §120, of any prior United States application(s), or under §365(c) of any PCT international application(s) designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose all information known by me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56, which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

<u>Prior U.S.</u>	<u>Prior PCT</u>	<u>Filing Date of</u>	<u>Patent Number</u>
<u>Application Number</u>	<u>International</u>	<u>U.S. or PCT</u>	<u>(if applicable)</u>
<u>Application Number</u>	<u>Application Number</u>	<u>International</u>	<u>Application</u>

As a named inventor, I hereby appoint the practitioners associated with Customer Number 22242, with full power of substitution and revocation, to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith, and request that all correspondence and telephone calls in respect to this application be directed to FITCH, EVEN, TABIN & FLANNERY, Suite 1600, 120 South LaSalle Street, Chicago, Illinois 60603-3406, Telephone No. (312) 577-7000, Facsimile No. (312) 577-7007, CUSTOMER NUMBER 22242.



I hereby declare that all statements made herein of my own knowledge are true, and that all statements made herein on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity or enforceability of the application or any patent issued thereon.

Full name of sole or one
joint inventor:

C. Joseph Farahmandi

(Given names first, with Family name last)

Inventor's signature:

C. J. Farahmandi

Date:

10/22/99

Residence:

San Diego, CA 92129

(City and State for U.S. Residents;
City and Country for others)

Post Office Address:

10572 Bernabe Drive

San Diego, CA 92129

Citizenship:

U.S.

Full name of sole or one
joint inventor:

John M. Dispennette

(Given names first, with Family name last)

Inventor's signature:

John M. Dispennette

Date:

10/22/99

Residence:

Oceanside, CA 92057

(City and State for U.S. Residents;
City and Country for others)

Post Office Address:

1200 B. Natoma Way

Oceanside, CA 92057

Citizenship:

U.S.

Full name of sole or one
joint inventor:

Edward Blank

(Given names first, with Family name last)

Inventor's signature:

Edward Blank

Date:

10-22-99

Residence:

San Diego, CA 92120

(City and State for U.S. Residents;
City and Country for others)

Post Office Address:

5619 Raymar Avenue

San Diego, CA 92120

Citizenship:

U.S.

Full name of sole or one
joint inventor:

Robert W. Crawford

(Given names first, with Family name last)

Inventor's signature:

Robert W. Crawford

Date:

10/22/99

Residence:

Menifee, CA 92585

(City and State for U.S. Residents;
City and Country for others)

Post Office Address:

30507 Bayport Lane

Menifee, CA 92584

Citizenship:

U.s.

Full name of sole or one
joint inventor:

Chenniah Nanjundiah

(Given names first, with Family name last)

Inventor's signature:

Chenniah Nanjundiah

Date:

10/25/99

Residence:

San Diego, CA 92129

(City and State for U.S. Residents;
City and Country for others)

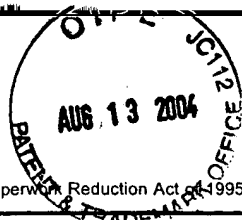
Post Office Address:

14309 Dalhousie Road

San Diego, CA 92129

Citizenship:

U.S



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

I hereby appoint:

☐ Practitioners associated with the Customer Number:

OR

☒ Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):

Name	Registration Number
Gregory J. Koerner	38,519

as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).

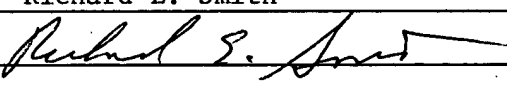
Assignee Name and Address:

Maxwell Technologies, Inc.
9244 Balboa Avenue
San Diego, California 92123
United States of America

A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.

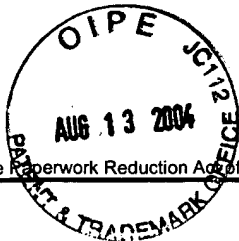
SIGNATURE of Assignee of Record

The individual whose signature and title is supplied below is authorized to act on behalf of the assignee

Name	Richard E. Smith		
Signature		Date	6/3/04
Title	Executive Vice President	Telephone	858-503 3325

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

**STATEMENT UNDER 37 CFR 3.73(b)**Applicant/Patent Owner: C. Joseph Farahmandi, John M. Dispennette, Edward Blank, Robert W. Crawford, Chenniah NanjundiahApplication No./Patent No.: 10/815,260 Filed/Issue Date: March 31, 2004Entitled: Method For Making A Multi-Electrode Double Layer Capacitor Having Hermetic Electrolyte SealMaxwell Technologies, Inc., a corporation

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or2. ☐ an assignee of less than the entire right, title and interest.

The extent (by percentage) of its ownership interest is _____ %

in the patent application/patent identified above by virtue of either:

A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 013456, Frame 0201, or for which a copy thereof is attached.

OR

B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: _____ To: _____

The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

2. From: _____ To: _____

The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

3. From: _____ To: _____

The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.☐ Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

8/3/04

Date

(408) 873-3943

Telephone number

Gregory J. Koerner

Typed or printed name

Signature

Attorney of Record

Title

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.